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COMBINED DECLARATION AND POWER OF ATTORNEY Attorney Docket No. 07844-356001 Client No. P331

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below-named inventor, I hereby declare that:

the specification of which:

My residence, post office address and citizenship are as stated next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COMPOSITE RENDERING INTENT FOR COLOR PROOFING APPLICATIONS

[x] is attached he	ereto.	
[] was filed on	·	
[] und [] with	er Application No Express Mail No	(Application Number not yet known).
[] was described and claimed in PCT International Application No		
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.		
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, code of Federal Regulations, Section 1.56(a).		
I hereby appoint all registered practitioners associated with Customer Number 021876 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, and direct that all correspondence be addressed to:		
Customer Number 021876		
Direct all telephone calls to Roger S. Borovoy, Reg. No. 20,193 at telephone number (650) 322-5070.		
[X] For Assigned Inventions: I understand that the purpose of making this appointment is to permit prosecution of patent applications for the above-identified invention for the benefit of my assignee, and that this appointment does not create an attorney-client relationship between me and these appointees.		
made on information and knowledge that willful false	belief are believed to be true; and further the e statements and the like so made are pun f the United States Code and that such will	knowledge are true and that all statements nat these statements were made with the ishable by fine or imprisonment, or both, under ful false statements may jeopardize the validity
Full name of inventor:	Peter S. MacLeon	
Inventor's signature	MANUEL STATE OF THE STATE OF TH	Date: 4/28/2000
Residence: Citizen of: Post Office Address:	San Diego, CA United States 10674 Carillon Court San Diego, CA 92131	